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PTO/SB/21 (02-04)
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/003,047	
	Filing Date	January 5, 1998	
	First Named Inventor	Albert J.J. VAN OOYEN	
	Art Unit	1638	
	Examiner Name	D. H. Kruse	
Total Number of Pages in This Submission	4	Attorney Docket Number	261922003302

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Request to Withdrawal as Attorney or Agent and Change of Correspondence Address (1 page, plus 2 copies) Return Postcard
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	MORRISON & FOERSTER LLP Kate H. Murashige - 29,959
Signature	
Date	August 13, 2004

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Dated: August 13, 2004	Signature: (Matthew Russell)



PTO/SB/83 (09-03)

Approved for use through 11/30/2005. OMB 0651-0035

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REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	09/003,047
	Filing Date	January 5, 1998
	First Named Inventor	Albert J.J. VAN OUYEN
	Art Unit	1638
	Examiner Name	D. H. Kruse
	Attorney Docket Number	261922003302

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The reasons for this request are:

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Name	Kate H. Murashige				
Signature				Registration No.	29,959
Date	August 13, 2004			Telephone No.	(858) 720-5112

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